IHOB RENTAL FORM

Blank Conversations Theatre Company

 $\underline{blank conversations co@gmail.com}$

Full Name (or G	Group Name):
	rs:
☐ Free-land	usical Ensemble ce Artist nity Member
If other, please 6	elaborate:
Requested date	and time:
Date:	_// Time::
□ v	Veekly/Monthly rentals
Γ	Dates and times:
_	
_	
-	
Reason to rent o	out the space:
	e audition oncert/gig venue
Equipment/spac	e needs:

Personnel/staff needs:	
RENTAL PRICING	
One time rehearsal space (group): \$25/hr or \$60/3 hrs	
Monthly rehearsal space (group): \$20/hr	
Self-tape audition/personal rehearsal space: \$15	
Recurring rehearsal space: \$20/hr or \$50/3 hrs	
Party/celebration: \$50 for an event	
Performance: \$100	
- If your party fails to properly clean IHOB before you party leaves you will charged an	
additional cleaning fee of \$20	
Wif-fi Access: \$5	
FOR OFFICIAL USE ONLY (to be filled out by representatives of Blank Conversations)	
Request received by: Date:/	
☐ Approved	
☐ Denied	
Required servies from BCTC members and who will be responsible for said services:	
Vice President signature:	
Secretary signature:	